



New Jersey Office of the Attorney General
Division of Consumer Affairs

Board of Pharmacy

124 Halsey Street, 6th Floor, P.O. Box 45013
Newark, New Jersey 07101

AUTOMATED MEDICATION SYSTEM

Survey Form

Pharmacy trade name: _____ Date of inspection: _____
City where located: _____ Bureau assignment: _____

I. Type of Automated Medication System

Make: _____ Model: _____

Date of installation: _____ Dept. of Weights and Measures inspection date: _____

Operational? ☐ Yes ☐ No

Comments:

II. Compliance Checking Activity (N.J.A.C. 13:39-10.3)

R.P.I.C. Responsible for Unit: _____

a. 13:39-10.3(a)3 - Pharmacy Testing for Accurate Dispensing:

Last date of testing: _____

Results available:

b. 13:39-10.3(b)2 - System Inspected for Expiration Date, Misbranding and Physical Integrity:

Date of last monthly testing: _____

Results available:

General comments regarding 13:39-10.3 et seq.:

III. Policies and Procedures (13:39-10.4)

- a. Does a written Policies and Procedures S.O.P. exist and is it readily available for review? ☐ Yes ☐ No

(**Table of Contents attached as Exhibit No. _____**)

- b. 13:39-10.4(a)6 - Accountability record relative to stocking and removing medications from the automated medication system.

Is an accountability record which documents all transactions relative to stocking and removing medications from the automated medication system answered?

☐ Yes ☐ No

- c. 13:39:10.4(b) and (c) - Is an annual review of S.O.P. conducted?

☐ Yes ☐ No

Date of last review: _____

General comments regarding 13:39-10.4:

IV. Quality Assurance (13:39-10.6)

- a. (13:39-10.6(a)2 - Description of procedure to test accuracy of system: (**To be conducted at least every six months.**)

Date of last testing: _____ Results available: _____

- b. (13:39-10.6(a)3 - Protocol for Measuring Effectiveness of System: (**Briefly describe**)

- c. (13:39-10.6(a)4 - Recurring error reporting: (**Briefly describe**)

- d. (13:39-10.6(a)5 - Documentation maintenance regarding the written Quality Assurance Program:

General comments regarding 13:39-10.6:

V. Is any evidence available that "Personnel Training Requirements" are not being satisfactorily met? (13:39-10.4)

☐ Yes ☐ No

Comments:

VI. Written Plan for Recovery from a Disaster (13:39-10.7)

- a. Does the pharmacy maintain a written plan for recovery from a disaster? ☐ Yes ☐ No
- b. Is a copy of that plan available on site for inspection review? ☐ Yes ☐ No
- c. Does the Recovery Plan include information regarding planning and preparation, response, maintenance, testing of the plan and notification of appropriate agencies? ☐ Yes ☐ No

Comments regarding 13:39-10.7:

VII. Written Program for Preventative Maintenance (13:39-10.8)

- a. Does the pharmacy maintain a written program for preventative maintenance? ☐ Yes ☐ No
- b. Is a copy of that preventative maintenance written program available for inspection review? ☐ Yes ☐ No

Comments regarding 13:39-10.8:

Overall miscellaneous remarks/comments:

Inspected party representative

E.B. inspector